ORCHARD MANOR FDD

8800 HWY 61

LANCAS	TER 5	3813	Phone: (608)	723-2113		Ownership:	County
Operat	ed from 1/1	To 12/31	Days of C	Operation:	366	Highest Level License:	FDDs
Operat	e in Conjunct	ion with H	Mospital?		No	Operate in Conjunction with CBRF?	No
Number	of Beds Set	Up and Sta	affed (12/3	31/04):	46	Title 18 (Medicare) Certified?	No
Total	Licensed Bed	Capacity (	12/31/04):		46	Title 19 (Medicaid) Certified?	Yes
Number	of Residents	on 12/31/	04:		42	Average Daily Census:	44

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents (1	12/31/04)	Length of Stay (12/31/04)	%
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis	%	Age Groups	<b>%</b>	Less Than 1 Year	7.1 11.9
Supp. Home Care-Household Services	No	Developmental Disabilities	100.0	Under 65	71.4	1 - 4 leals   More Than 4 Years	81.0
Day Services	No	Mental Illness (Org./Psy)	0.0	65 - 74	11.9		
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	14.3		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	2.4	*********	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.0	Full-Time Equivalent	
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 Res	idents
Home Delivered Meals	No	Fractures	0.0	İ	100.0	(12/31/04)	
Other Meals	No	Cardiovascular	0.0	65 & Over	28.6		
Transportation	No	Cerebrovascular	0.0			RNs	4.6
Referral Service	No	Diabetes	0.0	Gender	%	LPNs	9.1
Other Services	No	Respiratory	0.0			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	0.0	Male	52.4	Aides, & Orderlies	58.3
Mentally Ill	No			Female	47.6		
Provide Day Programming for			100.0	İ			
Developmentally Disabled	Yes			Í	100.0	İ	

## Method of Reimbursement

		edicare itle 18			edicaid itle 19			Other		P	rivate Pay	2		amily Care			anaged Care	Į		
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				42	100.0	179	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	42	100.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende:	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		42	100.0		0	0.0		0	0.0		0	0.0		0	0.0		42	100.0

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*********	*****	*********	******	*****	*****	********	******
Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services,	and Activities as of 12/	31/04
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	25.0	Bathing	2.4		64.3	33.3	42
Other Nursing Homes	25.0	Dressing	28.6		40.5	31.0	42
Acute Care Hospitals	0.0	Transferring	52.4		26.2	21.4	42
Psych. HospMR/DD Facilities	37.5	Toilet Use	38.1		26.2	35.7	42
Rehabilitation Hospitals	0.0	Eating	40.5		35.7	23.8	42
Other Locations	12.5	********	******	*****	******	*******	******
Total Number of Admissions	8	Continence		8	Special Treat	ments	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	4.8	Receiving R	espiratory Care	2.4
Private Home/No Home Health	15.4	Occ/Freq. Incontiner	nt of Bladder	47.6	Receiving T	racheostomy Care	2.4
Private Home/With Home Health	15.4	Occ/Freq. Incontiner	nt of Bowel	38.1	Receiving S	uctioning	2.4
Other Nursing Homes	15.4				Receiving O	stomy Care	2.4
Acute Care Hospitals	7.7	Mobility			Receiving T	ube Feeding	11.9
Psych. HospMR/DD Facilities	15.4	Physically Restraine	ed	0.0	Receiving M	echanically Altered Diets	47.6
Rehabilitation Hospitals	0.0						
Other Locations	7.7	Skin Care			Other Residen	t Characteristics	
Deaths	23.1	With Pressure Sores		0.0	Have Advanc	e Directives	2.4
Total Number of Discharges		With Rashes		0.0	Medications		
(Including Deaths)	13				Receiving P	sychoactive Drugs	26.2

Selected Statistics: This FDD Facility Compared to Similar Facilities & Compared to All Facilities

	This Facility	=	DD Cilities		All ilties	
	%	8	Ratio	%	Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	88.4	93.1	0.95	88.8	0.99	
Current Residents from In-County	47.6	35.3	1.35	77.4	0.61	
Admissions from In-County, Still Residing	0.0	11.4	0.00	19.4	0.00	
Admissions/Average Daily Census	18.2	20.4	0.89	146.5	0.12	
Discharges/Average Daily Census	29.5	28.3	1.04	148.0	0.20	
Discharges To Private Residence/Average Daily Census	9.1	12.1	0.75	66.9	0.14	
Residents Receiving Skilled Care	0.0	0.0	0.00	89.9	0.00	
Residents Aged 65 and Older	28.6	16.0	1.78	87.9	0.33	
Title 19 (Medicaid) Funded Residents	100.0	99.1	1.01	66.1	1.51	
Private Pay Funded Residents	0.0	0.5	0.00	20.6	0.00	
Developmentally Disabled Residents	100.0	99.2	1.01	6.0	16.57	
Mentally Ill Residents	0.0	0.4	0.00	33.6	0.00	
General Medical Service Residents	0.0	0.4	0.00	21.1	0.00	
Impaired ADL (Mean)*	49.5	55.0	0.90	49.4	1.00	
Psychological Problems	26.2	48.1	0.54	57.7	0.45	
Nursing Care Required (Mean)*	8.6	10.7	0.80	7.4	1.16	